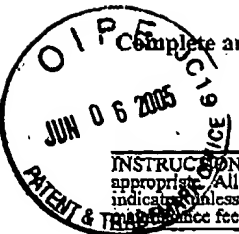


JUN. '6. 2005 9:00AM

AVENTIS US PAT DEPT (S) TRANSMITTAL

NO. 5868 P. 3



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05487 7590 05/11/2005

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<i>Debra Coughlin</i>	(Depositor's name)
<i>Debra Coughlin</i>	(Signature)
<i>June 6, 2005</i>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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08/791,240

01/30/1997

ALEXANDER J. RYNCARZ

BDI-1020

2505

TITLE OF INVENTION: POSITIVE CONTROLS IN POLYNUCLEOTIDE AMPLIFICATION

06/06/2005 HDEMSS2 00000097 181982 08791240

01 FC:1501

1400.00 DA

02 FC:8001

9.00 DA

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional

NO

\$1400

\$0

\$1400

08/11/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
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SISSON, BRADLEY L

1634

435-091200

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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*William C. Coppola*

2

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

Aventis Pharmaceuticals Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Bridgewater, New Jersey

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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Authorized Signature

*Karen I. Krupen*

Date

*June 6, 2005*

Typed or printed name

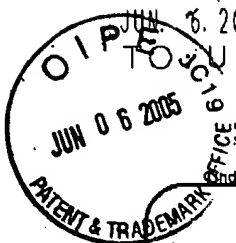
Karen I. Krupen

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34,647

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NO. 5868 P. 1

PTO/SB/21 (09-04)

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	08/791,240	
	Filing Date	January 30, 1997	
	First Named Inventor	Alexander RYNCARZ	
	Art Unit	1634	
	Examiner Name	Bradley L. Sisson	
Total Number of Pages in This Submission	3	Attorney Docket Number	USAV2001/0133 US PCT

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<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
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<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.62 or 1.63	Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	AVENTIS PHARMACEUTICALS INC.	
Signature	<i>Karen Krupen</i>	
Printed name	Karen I. KRUPEN	
Date	Reg. No.	34,647
<i>June 6, 2005</i>		

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Signature	<i>Delia Coughlin</i>	
Typed or printed name	Delia Coughlin	Date <i>June 6, 2005</i>

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